

RURAL DISTRICT
OF
BRIDLINGTON
SANITARY AUTHORITY.

REPORT for the Year 1909,

OF
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BRIDLINGTON :

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REPORT, 1909.

BRIDLINGTON,

March 1st, 1910.

GENTLEMEN,

I have the honour to present to you my Annual Report on the Health and Sanitary Condition of the Rural District of Bridlington for 1909.

I have pleasure in reporting that the general health of the community has been very good during the past year—so far as mortality returns indicate. In spite of a somewhat scanty allowance of sunshine and a rather plentiful supply of rain, there has been no excess of serious sickness of the climatic type, and a more than usually light visitation of disease of the Zymotic Class—in which latter group there has been no fatal case at all—and the death-rate from general diseases has been extremely low.

Of course, a low death-rate does not necessarily connote a favourable rate of morbidity—by morbidity I mean proneness to disease or ill-health as indicated by the amount of non-fatal sickness prevailing in a neighbourhood—those illnesses not usually regarded as serious or urgent, and due either to locality or occupation or to a personal dyscrasia, the result of heredity, plus the other two. A familiar example of the first is Goitre, called “Derbyshire neck” from its prevalence in some parts of the County of Derby; the Ague, which at one time prevailed so largely in the Fens of Lincolnshire and the low-lying undrained parts of Essex, Suffolk, etc. Coal-miners’ Phthisis and Grinders’ Phthisis, Plumbism and Millers’ Asthma are typical examples of the morbidity begotten of occupation, whilst the Anæmias and Dyspepsias, general malaise

and too often stunted growth seen in mill and factory workers, are striking examples of the deleterious effect a vitiated atmosphere at home and in the workshop may have, not only upon the unfortunate workers themselves, but on their offspring.

The foetid atmosphere of crowded sleeping-rooms is a more potent factor in producing that condition of morbidity, or chronic ill-health, which renders the body an easy prey to the Tubercle spores and many other germs than any lack of food; but when both lack of suitable nourishment and absence of oxygen are constant factors of environment, little remains for the unfortunate unit but to surrender and make one more in the great army of victims to the White Plague.

These are salient points which should be noticeable by all, even "those who run may read." But what is not so evident, except to such of us as are engaged in Sanitary Work, in Hospitals and Convalescent Homes and so on, is that in our own District is a "Morbidity" rate, the expression and result of conditions allied—but not equal to—those I have above outlined. The recurring crops of Stomach and Bowel Catarrhs, Coughs, Colds, and Sore Throats, which with a little Whooping Cough, Mumps, and Chicken Pox, all non-notifiable, thrown in, keep down the percentage of our school attendances and deteriorate our children's physique, come round with the unvarying frequency of the seasons, are fairly widespread but of no intensity, and are regarded as of the nature of the inevitable by parents and teachers alike. These manifestations of morbidity were not so obvious last year as in some previous years, but there was sufficient for those who scan with a practised eye—and seeing that it is a matter which mostly affects the young must claim the serious attention of a Rural Sanitary Authority. The Catarrhs attributed to the "changeable weather" are more often due to the dwelling not being weather-proof, and the Rheumatism of older people is more often the result of having no damp-course in the walls and defective paving of the kitchen floor, than to any "approaching rain."

Contaminated water and milk supplies, with filthy gullies in the backyard, are the chief causes of Summer Diarrhœa amongst infants; whilst Follicular Tonsilitis and Diphtheria more frequently than not convey their septic spores by the same channel.

The dwelling-house then and its surroundings, its domestic offices, conservancy system, and water supply should now, as ever, be the chief object of a Rural Sanitary Authority's solicitude. It is the pivot on which much of this morbidity hangs and circulates. Given a decently ventilated dwelling on a dry foundation, with proper domestic offices and a reliable water supply, and the occupants will be immune to most of the minor infectivities, and

each individual be able to develop a personal defence-wall of sound health and constitution. I regret that so little is being done in your District in the way of new buildings. Cottages, which for many years past have obviously "had their day," are still the only dwellings available in their neighbourhoods; honeysuckle and sweetbriar, whitewash and thatch—picturesque though they be—too frequently hide insanitary conditions.

I am glad to be able to report that both the Milk and Meat Supply of your District are receiving attention at the hands of Inspector Robson, but I am still of opinion that you should appoint a Veterinary Surgeon to give professional advice in these most important matters.

The purity of the Milk Supply is of infinitely greater importance than that of the Meat. An animal with a localised Tubercular lesion may provide meat of good quality and free from danger when properly cooked, but no known treatment of the milk from a 'Tuberculous udder, short of quite destroying its digestive and nutrient qualities, can make it harmless and free from the power of conveying the disease. The greatly increased use of Cows' Milk nowadays, both in the feeding of infants and invalids and the treatment of various forms of disease, makes the supervision of the milk business in all its departments—from production to storage and distribution—one of the most important functions a Sanitary Authority can exercise.

The long-standing question of the Hunmanby Water Supply has been settled this year by the adoption of the only legitimate course, and I very heartily congratulate you on the selection of a comprehensive scheme for this village and a neighbouring parish or two, and trust that before my next Annual Report is due it may be in active work. The water supply of Reighton should now receive your early attention.

The Drainage of both Skipsea, Barmston and Buckton is very defective, and should be dealt with in the near future.

The adoption of Public Scavenging in both Hunmanby and Flamborough has greatly improved both these important centres of population, and I shall be glad to see the system adopted in other villages.

I would draw your earnest and sympathetic attention to the section of Inspector Robson's admirable Report in which he deals with the Housing Question, and strongly support his recommendations. The lack of decent dwellings is, I am convinced, the chief factor in causing the depopulation in our country districts, and not

the dearth of employment. Every Sanitary Authority should exercise every power given to it under the various Housing Acts of the past twenty years to enforce the renovation or removal of old dwellings and the provision of new.

During the year you have twice had the provision of isolation accommodation before you. I was unable to advise you to adopt the County Council's scheme and amalgamate with other Rural Districts beyond. The distribution of population, and geographical position of your District, makes such a combination impracticable. Later you made a sound and businesslike offer, a shade too generous perhaps, to the Corporation of Bridlington, which was not accepted. I would strongly advise you to deal with this important question at an early date, on the basis of providing for your own needs and within the boundaries of your own District. It will be found the most convenient, and ultimately the most economical course to pursue.

POPULATION.

The local table of Parishes shows 84 deaths, and the table of gross mortality 76--the extra 8 are of inhabitants who have died outside the limits of the Rural District, but whose deaths having to be considered in working out the mortality-rate, are allocated to their respective localities.

TABULAR SYNOPSIS.

Sub-District.	Estimated Population in 1909.	Births in 1909.	Birth Rate.	Deaths.		Death Rates in 1909.		
				At all Ages	Under 1 year.	General.	Zymotic.	Infantile
Rural Bridlington	2522	43	16·7	40	5	15·8	0·00	116·2
Hunmanby	3492	83	23·7	29	6	8·3	0·00	72·2
Skipsea	1587	45	28·3	15	1	9·4	0·00	22·2
Rural Districts	7601	171	22·5	84	12	11·03	0·00	70·17

Name of Parish.	Population at Census in 1881.	Population at Census in 1891.	Population at Census in 1901.	Births in 1909	Deaths in 1909.	
					All Causes.	Zymotic.
Bessingby	80	87	170	2	...	...
Carnaby	180	200	192	3	1	...
Boynton	156	126	161	3	1	...
Easton	23	32	38	...	...	...
Hilderthorpe	26	41	80	...	...	...
Sewerby and Marton	343	331	330	3	7	...
Buckton	151	141	158	1	4	...
Flamborough	1355	1288	1189	25	23	...
Bempton & Newsome	309	310	284	6	4	...
Rural Bridlington ...	2626	2556	2602	43	40	...
Hunmanby	1351	1309	1289	32	13	...
Speeton	160	151	146	3	2	...
Grindale	179	157	154	4	2	...
Argham	39	40	40	...	...	...
Rudston	604	578	552	6	5	...
Thwing and Octon ...	439	367	326	11	3	...
Wold Newton	310	292	274	11	1	...
North Burton	543	425	422	12	3	...
Reighton	254	252	219	3	...	...
Fordon	57	38	38	1	...	...
Hunmanby Sub-Dist.	3936	3609	3460	83	29	...
Burton Agnes	342	321	326	9	1	...
Haisthorpe	123	121	118	4	1	...
Thornholme	110	115	84	3	1	...
Gransmoor	84	68	69	1	2	...
Lissett	90	105	98	1	...	...
Ulrome	194	198	187	7	5	...
Dringhoe, Upton, and Brough	156	156	136	1	...	...
Skipsea	398	341	288	11	2	...
Barmston	198	213	210	6	2	...
Fraisthorpe, Auburn, and Wilsthorpe ...	126	124	111	2	1	...
Skipsea Sub-District	1821	1762	1627	45	15	...
Rural District ...	8383	8927	7689	171	84	...

VITAL STATISTICS OF ENGLAND & WALES IN 1909.

The Birth-rate in England and Wales in 1909 was 25·6 per 1000 of the population, which is 0·9 below the rate in 1908, and lower than the rate in any other year on record. Compared with the average in the ten years 1899-1908, the Birth-rate in 1909 showed a decrease of 2·2 per 1000.

The Death-rate in 1909 was 14·5 per 1000, which is 0·3 below the rate in 1908, and lower than the rate in any other year on record. Compared with the average in the ten years 1899-1908, the Death-rate in 1909 showed a decrease of 1·6 per 1000.

The rate of mortality among infants under one year of age to 1000 registered births was 109, which is 11 per 1000 below the rate in 1908. Compared with the average in the ten years 1899-1908, the rate of infantile mortality in 1909 showed a decrease of 29 per 1000. The Death-rate among persons aged between one year and 60 years was 7·2, and that among persons aged 60 years and upwards was 70·5, per 1000 of the estimated population at the respective groups of ages.

The Zymotic Death-rate was 1·12 per 1000 living, against 1·77, 1·28, and 1·34 respectively in the three preceding years.

ANNUAL DEATH RATE PER 1000 LIVING.

	Birth Rate.	Death Rate, All Causes.	Principal Epi- demic Diseases in Cols. 4 & 10.	Small Pox.	Measles.	Scarlet Fever.	Diphtheria.	Whooping Cough.	Fever.	Diarrhoea.	Deaths under 1 year per 1000 Births.
Columns	1	2	3	4	5	6	7	8	9	10	11
England and Wales ...	25.6	14.5	1.12	0.00	0.35	0.09	0.14	0.20	0.06	0.28	109
76 Great Towns ...	25.7		1.42	0.00	0.48	0.11	0.15	0.24	0.06	0.38	118
143 Smaller Towns ...	24.8		1.08	0.00	0.33	0.09	0.16	0.17	0.06	0.27	111
England and Wales less the 219 Towns }	25.6		0.80	0.00	0.21	0.06	0.14	0.16	0.06	0.17	98

The Vital Statistics of England and Wales, together with this table, are taken from the Registrar-General's Report for the final quarter of 1909.

MARRIAGES.

The number of Marriages in the Rural District in 1909 was 35, being at the rate of 9·29 persons married to each 1000 living. The Marriage-rate for the three immediately preceding years was 10·4, 9·9, and 7·7. The mean average for the ten years 1899-1908 for England and Wales was 15·7.

BIRTHS AND BIRTH-RATES.

There were 171 Births registered in the Rural District during 1909, which is equivalent to a Birth-rate of 22·5 per 1000 living, as compared with 23·8 in 1908, 24·6 in 1907, and 26·9 in 1906.

The Sub-District Birth-rates were:—Rural Bridlington, 16·7; Hunmanby, 23·7; and Skipsea, 28·3. The Illegitimate Births number 14, and equal an Illegitimate Birth-rate of 1·8 per 1000 of the population, and 8·18 per cent of the total Births.

TABLE OF QUARTERLY TOTALS (BIRTHS.)

1909.				1908.		
BRIDLINGTON SUB-DISTRICT.				Males.	Females.	Total.
1st Quarter	6	5	11	10	5	15
2nd Quarter	7	5	12	9	9	18
3rd Quarter	2	4	6	4	3	7
4th Quarter	11	3	14	6	9	15
Totals	26	17	43	29	26	55
HUNMANBY SUB-DISTRICT.				Males.	Females.	Total.
1st Quarter	7	8	15	17	12	29
2nd Quarter	11	19	30	6	10	16
3rd Quarter	10	7	17	7	11	18
4th Quarter	14	7	21	16	12	28
Totals...	42	41	83	46	45	91
SKIPSEA SUB-DISTRICT.				Males.	Females.	Total.
1st Quarter	7	7	14	8	3	11
2nd Quarter	0	2	6	4	6	10
3rd Quarter	8	5	13	2	4	6
4th Quarter	6	6	12	4	5	9
Totals	21	20	45	18	18	36
Totals for Rural District	89	78	171	93	89	182

DEATHS AND DEATH-RATES.

The corrected Deaths for the Rural District in 1909 were 84, against 94 in 1908 and 104 in 1907. The Death-rate from all causes at all ages was 11·03 per 1000 living, as compared with 12·3, 13·5, and 14·20 in 1908, 1907, and 1906 respectively, and 13·6 for Rural England in 1909.

TABLE OF QUARTERLY TOTALS (DEATHS).

1909.				1908.		
BRIDLINGTON SUB-DISTRICT.	Males.	Females.	Total.	Males.	Females.	Total.
1st Quarter	10	4	14	2	5	7
2nd Quarter	2	5	7	7	2	9
3rd Quarter	7	1	8	4	6	10
4th Quarter	4	7	11	6	7	13
Totals...	22	17	40	19	20	39
HUNMANBY SUB-DISTRICT.						
1st Quarter	6	5	11	1	8	9
2nd Quarter	7	1	8	2	6	8
3rd Quarter	0	1	1	3	3	6
4th Quarter	6	3	9	9	1	10
Totals...	19	10	29	15	18	33
SKIPSEA SUB-DISTRICT.						
1st Quarter	3	3	6	7	2	9
2nd Quarter	0	2	2	3	3	6
3rd Quarter	1	3	4	3	2	5
4th Quarter	1	2	3	1	1	2
Totals...	5	10	15	14	8	22
Totals for Rural District	46	37	84	42	46	94

There were 12 deaths of children under one year of age, being in the proportion of 70·17 infantile deaths to each 1000 registered births, and 27·83 below the rate for Rural England and Wales in 1909, and 39·83 below the corresponding rate for 1908.

CAUSES OF DEATH.

There were no deaths ascribed during the year to any one of the "Seven Principal Zymotic Diseases." Cancer and Malignant Disease accounted for 7 deaths, as against 8 in the previous year. Influenza only caused one death; Bronchitis and Pneumonia totalled 7, the same number as in the preceding year, whilst Tubercular Diseases show a decrease of eight, or only one-third the number recorded in 1908. There were 16 coroner's inquests and 9 deaths from senile decay. The number of deaths from Premature Birth was the same as in the previous year, but there were no deaths from Teething.

AGE.

There were 14 deaths of children under 15 years of age; 33 persons had attained to 65 years and upwards, with 29 in the middle period of life. The figures for 1908 and 1907 were 19, 40, and 35, and 31, 31, and 35 respectively.

INFECTIOUS DISEASES (NOTIFICATION) ACT.

Disease.	Rural District.	SUB-DISTRICT.			1st Quarter.	2nd Quarter.	3rd Quarter.	4th Quarter.
		Rural Bridlington.	Hunmanby,	Skipsea.				
Diphtheria ...	6	2	1	3	...	...	6	...
Erysipelas ...	1	1	...	...	...	1	...	..
Scarlet Fever...	4	...	4	...	3	1	...	...
Enteric Fever...	1	1	...	...	...	...	...	1
Measles	1	1	...	...	...	...	1	...
Totals ...	13	5	5	3	3	2	7	1

NOTIFICATION STATISTICS FOR YEARS
1900-1909.

Disease.	1900	1901	1902	1903.	1904.	1905.	1906.	1907.	1908.	1909.
Diphtheria ...	2	8	...	6	1	5	48	22	16	6
Erysipelas ...	7	3	5	1	6	6	6	2	1	1
Scarlet Fever ...	49	41	15	9	6	13	9	2	4	4
Enteric Fever ...	1	7	2	...	1	7	1	...	1	1
Puerperal Fever	...	...	...	...	...	...	...	1	...	...
Measles ...	97	12	2	10	142	31	126	82	15	1
Totals ...	156	71	24	26	156	62	190	109	37	13

Of the 35 specimens sent for Bacteriological examination, 31 were Throat Swabs, and furnished 26 negative and 5 positive returns.

Two Phthisis (negative) and two Enteric (one negative, one positive.)

DEATHS FROM CERTAIN DISEASES IN THE YEARS 1900-1910.

	1900	1901.	1902.	1903.	1904.	1905.	1906.	1907.	1908.	1909.
Diarrhœa	1	3	...	1	4	2	1	1	...	...
Measles	2	...	...	...	1	...	2	3	...	...
Enteric Fever ...	...	1	...	..	...	...	...	...	...	...
Scarlet Fever ...	1	1	...	...	...	...	...	...	...	...
Diphtheria ... ..	...	3	...	...	1	2	4	4	...	...
Influenza	5	1	...	...	...	2	2	4	3	1
Childbirth... ..	1	1	...	1	3	...	2	1	...	...
Bronchitis, Pneumonia ...	16	16	9	10	12	17	11	9	7	8
Tuberculosis ...	12	6	7	11	4	15	9	6	12	4
Cancer	3	11	4	4	5	8	10	4	8	5

VACCINATION STATISTICS.

The following table relates to Vaccination in the Bridlington Registration Sub-District, the Borough of Bridlington contributing the bulk of the population, but the paragraph following the table relates to the Hunmanby and Skipsea Sub-Districts, each being a Vaccination area. Such portion of Bridlington as is outside the Borough Boundary, together with Hunmanby and Skipsea areas, form the Rural Sanitary District. The figures are the complete returns for 1908 and previous years.

In 1908, in the Hunmanby and Skipsea Sub-Districts, there were 128 births, of which 102 were successfully vaccinated, 9 were exempt on account of "conscientious objection," eight died unvaccinated, three removed to a district known, the Vaccination Officer of which was duly notified, two removed to districts unknown, and four were postponed by medical certificate.

For the first half of 1909, there were registered in the whole Union 242 births; of these 107 were successfully vaccinated, one

Year.	Births.	Successfully Vaccinated.	Insusceptible.	Died Unvaccinated.	Postponed by Medical Certificate.	Removed to Districts known.	Removed to Districts unknown.	Conscientious Objectors	Unaccounted for.	Per cent. lost sight of or unaccounted for.
1897	344	212	3	33	...	2	1	3	89	26.7
1898	348	222	7	52	1	3	7	3	51	16.6
1899	373	268	6	36	10	4	7	17	25	8.5
1900	363	263	1	41	1	1	17	23	33	9.09
1901	396	291	...	51	4	2	11	32	5	4.0
1902	382	313	2	32	3	1	11	18	2	3.4
1903	366	284	2	29	...	...	18	25	8	7.1
1904	382	269	6	34	...	...	17	45	11	7.3
1905	352	262	1	24	1	1	25	23	15	11.3
1906	353	261	1	22	...	2	15	39	12	7.6
1907	353	207	3	27	2	6	14	66	28	11.8
1908	296	117	2	21	...	1	13	125	17	10.1

was insusceptible, 20 died unvaccinated, 92 were exempt on account of "conscientious objection." 3 were postponed by medical certificate, 2 removed to districts known, the Vaccination Officers of which were duly notified, 5 removed to districts unknown, and 12 were lost sight of.

That table of Vaccination Statistics is a grievous indictment against the wisdom of those politicians who permitted such a misnomer as "conscientious objection" to creep into the Statute Book. With more than half the surviving children of 1908 unvaccinated in a district, what will occur with the appearance of Small Pox infection. The holocaust of innocent victims, the disfigurement and suffering of survivors and the huge pecuniary loss to the community may very well "stagger humanity." For the virulence of Small Pox is not lost, it is still the same disease which depopulated countries, brought armies to a standstill, and paralysed the movements of trade and commerce. From pre-historic times till the last century Small Pox was the most terrible, constant, death-dealing disease known to man. No longer ago than 1760 a seventh of all deaths in the kingdom were due to Small Pox—two out of every three people you met in the street were marked with it, and those who were not marked had the greatest difficulty in obtaining situations in places of trust, for none knew when they might fall victims to it. (1)

Dr. Buchan, writing in his "System of Medicine," an authoritative book of 150 years ago, speaks as follows: "The inexpressible

(1.) *Vide* "Tatler," Spectator," &c., 1755

terrors that perpetually harass persons who have never had the disease, and who live in apprehension of getting it, inasmuch as villages are depopulated, markets ruined, and distress spread over the whole country." "By it," he says "justice is frequently postponed or discouraged; at Sessions or Assizes witnesses and juries dare not appear; and even our honourable and useful judges are not attended with the reverence due to their office. Such as have not had Small Pox are not only rendered unhappy, but also in a great measure unfit for sustaining many of the more useful and important offices. Few people would even hear of a servant who had not had it." "How could a physician who had never had Small Pox attend others with that malady?" "How deplorable is the situation of females, who arrive at mature age without having had Small Pox. The woman with child seldom survives this disease, and if an infant happens to be seized with Small Pox upon its mother's breast, the scene was distressing," and he goes on to relate the frequency with which he has seen both mother and infant fall untimely victims to this malady. (1)

Lord Macaulay, writing of Queen Mary's death from Small Pox in 1694, says that it was then the most terrible of all the ministers of death. "The Small Pox was always present, filling the churchyards with corpses, tormenting with constant fears all whom it had not yet stricken, leaving on those whose lives it spared the hideous traces of its power, turning the babe into a changeling at which the mother shuddered, and making the eyes and cheeks of the betrothed maiden objects of horror to the lover."

To come nearer home, take the Census returns of Ireland for the years 1841 and 1851. The deaths returned as having been caused by Small-Pox in the ten years ended 1841 were as many as 58,006; and in the ten years ended 1851 the deaths from this disease were 38,275—a total death-roll of 96,281 in twenty years, or 4,814 deaths per annum. (2)

Contrast this with the statement which appears in the 45th Annual Report of the Registrar-General for Ireland, that in the year 1908 not a single death from small-pox was registered in that country during the year. (3) Vaccination was made compulsory in Ireland in 1861.

(1) *Vide* "Medical Officer," 1910 (April.)

(2) and (3) Registrar-General for Ireland's Report.

Dr. Immerman, of Basle, in a Monograph on Vaccination in Nohrnagel's Encyclopedia of Medicine, sums up the matter in a masterly manner as follows:—

“ Up to Jenner's time, variola was the most common and deadly of epidemic diseases.

“ Vaccination was the first means that produced a change in a prophylactic respect, and it fulfils the claims of a perfect prophylactic against small-pox. It is easily performed, and its practice is dangerous to no one. It lends to the vaccinated, when it takes, an almost sure temporary protection against small-pox. Actual injuries to health in general are not to be apprehended. The doctrine of degenerating influence in the race is simply false. The diminution in the morbidity and mortality of small-pox in the nineteenth century is the result of vaccination and nothing else.”

Where then are we to find the foundation for the trashy statements which pass for arguments among a certain class of writers and speakers? Are not the faces of the population sufficient evidence of the value of the prophylactic? Possibly some of the harm already done may be due to lax administration of the Act and too easy granting of “exemptions.” Surely the Legislature can never have contemplated the possibility of anyone walking into a shop and getting exemption with the week's provisions, after all the labour and expense of the Royal Commission.

To claim exemption, a person must “conscientiously believe” that vaccination will be to the *detriment* of the health of the particular infant to which the certificate refers; and swear an affidavit or make an affirmation to that effect before a Justice of the Peace. The parents' general opinion as to the prophylactic value of vaccination has nothing to do with it—for he probably knows nothing about it. “Belief” and “faith” have a fitting place in matters of religion—they can have none in doctoring, for in this accurate knowledge is required, *and may be obtained*.

I beg to thank the Council for their courtesy to me, and the careful consideration they have at all times given to my representations.

I am, Gentlemen,

Your obedient Servant,

W A. WETWAN, M.O.H.

To the Rural District Council
of Bridlington.

BRIDLINGTON RURAL DISTRICT COUNCIL.

BRIDLINGTON,

FEBRUARY, 1910.

SIR,

I have the honour to report to you on the Sanitary Administration in the District during 1909.

The routine work has been much as in previous years; complaints have been investigated, nuisances have been sought and found and remedied, in most cases without difficulty. The number of nuisances thus requiring abatement was not large, and they were, for the greater part, of a minor character. A tabulated statement shewing the number and variety of these cases is appended.

The Cowsheds have during the year received the usual visits, and occasionally suggestions have been made to the proprietors in order to obtain due care and cleanliness. The majority are in fair structural condition, though there are a few which, were it not for the free and sufficient air space surrounding them, would not be suitable. They are mostly good examples of the accommodation for dairy cattle usually found in the Wold districts. The milkers and others engaged in dealing with the produce exercise care in observing that their hands and utensils are clean. For this purpose a circular was issued out to the Cowkeepers and Dairymen during the year.

The Slaughter-houses in use in the District have also been frequently visited, and have been found to maintain their customary condition of cleanliness and wholesomeness. The proprietors do their best, and they succeed in keeping their premises in sanitary condition.

The Workshops in the various villages have received attention, and their sanitary arrangements appear to be sufficient and suitable. Very few of these places provide work for more than one or two hands in addition to the proprietor, and therefore the sanitary provisions of the Factory Acts apply to the District in a very small degree.

In regard to public work carried out during the year, mention may be made that the sewerage of North Burton has been greatly improved. The main sewer has been carried to an outfall outside

the village, and a long-standing nuisance in the Gypsy Race has been abated. The northern end of the village of Sewerby was also re-drained, and that village has now in operation a satisfactory system of sewerage. Other sewerage work, chiefly extensions and improvements, has been carried out at Hunmanby and Ulrome.

Building enterprise in the Rural District has been almost at a standstill during the year. A few more cottages have been built or re-built at Hunmanby, whilst the houses in Hungate Row and Prospect Place at Hunmanby were made more habitable; and at Flamborough one or two residential houses were put up; otherwise no attempt has been made to provide increased and improved housing for the labouring classes in the villages. This is unfortunate, as the lack of suitable houses is severely felt. This dearth is one of the causes of the rural exodus, because there are not sufficient houses *of any kind* to meet the requirements of would-be tenants, whilst numbers in existence in the District have long since passed their time of usefulness, and are out of harmony with modern ideals. Many of these cottages, erected to accommodate an age when the occupier could get his family away and on to the farmsteads by the time they were 8 or 9 years old, are quite inadequate for living and sleeping purposes in these days of Education Acts and Bye-laws, when children have to remain at school (and consequently under the parental roof) until they are 13 or maybe 14 years old. Rural de-population, if not encouraged, is not discouraged by this want of suitable housing. Often it occurs that young people, desirous of being married and settled, are deterred because they cannot find a house in their village or the next one, and the tendency is for them to make for the nearest town.

Below is given a statement shewing the number and variety of the nuisances dealt with, and other information:—

Over-crowding of dwelling houses	...	...	...	3
Defective or deficient drainage	...	...	...	18
Water courses or pools causing offence	...	...	...	2
Polluted water supplies	...	...	...	2
Accummulations of garbage and rubbish	...	...	...	2
Defects in dwelling houses and out offices	...	...	...	7
Nuisances caused by animals	...	...	...	4

Number of (registered)	Cowsheds in the District	...	73
„	„	Slaughter-houses	... 10
„	„	Workshops and Workplaces	<u>38</u>

I am, Sir,

Your obedient Servant,

F. H. ROBSON.

VITAL STATISTICS OF WHOLE DISTRICT DURING 1909 AND PREVIOUS YEARS.

Year	Population estimated to Middle of each Year.	BIRTHS.		TOTAL DEATHS REGISTERED IN THE DISTRICT.						NET DEATHS AT ALL AGES BELONGING TO THE DISTRICT.	
		Number.	Rate.	Under 1 year.		At all Ages.		Deaths of Residents registered in Public Institutions beyond the District.	Number.	Rate.	
				Number.	Rate per 1000 Births registered.	Number.	Rate.				
1899	8648	219	26.00	26	118.9	101	11.68	101	11.68		
1900	8708	209	24.00	22	105.3	99	11.36	99	11.36		
1901	7689	205	26.67	27	131.21	115	15.08	121	15.74		
1902	7680	207	26.65	15	72.46	92	11.97	99	12.89		
1903	7724	177	22.91	26	146.8	95	12.29	102	13.2		
1904	7780	201	25.96	26	129.5	98	12.59	103	13.24		
1905	7740	186	24.03	18	96.77	96	12.04	102	13.17		
1906	7714	208	26.9	20	96.1	104	13.4	110	14.00		
1907	7674	188	24.6	21	111.7	97	12.6	104	15.5		
1908	7638	182	23.8	13	71.4	88	11.5	94	12.3		
Averages for years 1899-1908.	7899.5	198.2	25.15	21.4	107.49	98.5	12.45	103.5	13.3		
1909	7601	171	22.5	11	70	76	10.02	84	11.5		

Area of District, 60,000 acres. Total population at all ages, 7689. Number of Inhabited houses, 2256.

Average number of persons per house, 3.4, Census of 1901.

Institutions outside District receiving sick and infirm persons from the District:—

The East Riding Asylum, Beverley; The Royal Infirmary, Hull; The Union Infirmary Bridlington;

The Lloyd Hospital, Bridlington; St. Anne's Convalescent Home, Bridlington.

VITAL STATISTICS OF SEPARATE LOCALITIES IN 1909 AND PREVIOUS YEARS.

NAMES OF LOCALITIES.	WHOLE DISTRICT.				RURAL BRIDLINGTON.				HUNMANBY.				SKIPSEA.			
	Population estimated to middle of each year.	Births Registered.	Deaths at all Ages.	Deaths under 1 year.	Population estimated to middle of each year.	Births Registered.	Deaths at all Ages.	Deaths under 1 year.	Population estimated to middle of each year.	Births Registered.	Deaths at all Ages.	Deaths under 1 year.	Population estimated to middle of each year.	Births Registered.	Deaths at all Ages.	Deaths under 1 year.
YEAR.																
1899 ..	8648	219	101	26	2820	60	40	11	3961	120	47	11	1866	39	14	4
1900 ..	8708	209	99	22	2838	60	34	5	3988	108	48	13	1882	41	17	4
1901 ..	7689	205	121	27	2602	65	37	8	3460	99	55	15	1627	41	29	4
1902 ..	7680	207	99	15	2630	61	39	3	3450	104	44	10	1600	42	16	2
1903 ..	7724	177	102	26	2638	51	31	4	3486	99	51	17	1600	29	17	5
1904 ..	7780	201	103	26	2660	69	34	9	3516	93	42	10	1604	39	27	7
1905 ..	7740	186	102	18	2630	52	44	5	3520	101	38	8	1590	33	20	5
1906 ..	7714	208	110	20	2632	69	32	6	3507	102	53	11	1585	37	25	3
1907 ..	7674	188	104	21	2595	67	48	5	3498	93	43	15	1581	28	13	1
1908 ..	7638	182	94	13	2563	55	39	5	3497	91	33	6	1576	36	22	2
Averages of Years 1899 to 1908.	7899.5	198.2	103.5	21.4	2659.8	60.9	37.8	6.1	3588.3	101	45.4	11.6	1651.1	36.5	20	3.7
1909 ..	7601	171	84	12	2522	43	40	5	3492	83	29	6	1537	45	15	1

CASES OF INFECTIOUS DISEASE NOTIFIED DURING THE YEAR 1909.

NOTIFIABLE DISEASE.					At all Ages.	TOTAL CASES NOTIFIED IN EACH LOCALITY.		
						Rural Brid'ton.	Hun- manby.	Skipsea.
Diphtheria	...	...	...	...	6	2	1	3
Erysipelas	...	...	...	...	1	1		
Scarlet fever	...	...	...	...	4		4	
Enteric fever	...	...	...	...	1	1		
Measles	...	...	...	...	1	1		
Totals	...	...	...	...	13	5	5	3

CAUSES OF, AND AGES AT, DEATH, DURING THE YEAR 1909.

CAUSES OF DEATH.		All Ages.	Under 1 year.	1 and under 5.	5 and under 15.	15 and under 25	25 and under 65	65 and upwards,	Rural Bridlington	Hunmanby	Skipsea.
Epidemic Influenza	...	1	...	...	...	...	1	...	1	...	...
Phthisis	...	3	...	...	...	...	3	...	...	2	1
Other tuberculous diseases	...	1	1	...	...	...	...	...	...	1	...
Cancer	...	5	...	...	...	2	3	...	2	2	1
Bronchitis	...	5	...	...	...	1	4	...	2	1	2
Pneumonia	...	3	1	1	...	...	...	1	2	1	...
Pleurisy	...	1	...	...	...	...	1	...	1	...	...
Premature Birth	...	5	5	...	...	...	...	...	...	4	1
Heart Diseases	...	7	...	...	...	...	5	2	4	2	1
Accidents	Inquests	8	...	...	...	3	4	1	7	1	...
Suicides		...	...	...	...	...	...	...	...	...	...
Natural Causes		6	2	...	...	...	1	3	1	4	1
All other Causes		39	3	2	...	1	9	24	20	11	8
All Causes	...	84	12	3	...	7	31	31	40	29	15

REPORT OF MEDICAL OFFICER OF HEALTH, on the
administration of the Factory and Workshop Act, 1901.

INSPECTIONS.

Premises.	Number of Inspections.	Number of Written Notices.	Number of Prosecutions.
Factories (Including Factory Laundries)	...	...	...
Workshops (Including Work- shop Laundries)	38	...	...
Workplaces (Other than Out- workers' premises)		...	...
Total	38	...	...

DEFECTS FOUND.

Total number of defects found and remedied ... 2

REGISTERED WORKSHOPS.

Total Number of Workshops on List ... 38